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24504 7590 12/01/2004

THOMAS, KAYDEN, HORSTEMEYER & RISLEY, LLP  
 100 GALLERIA PARKWAY, NW  
 STE 1750  
 ATLANTA, GA 30339-5948

01/11/2005 CNGUYEN1 00000016 10756913

01 FC:2501 700.00 OP  
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Jo Bryan	(Depositor's name)
<i>Jo Bryan</i>	(Signature)
January 7, 2005	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10756,913	01/13/2004	Zhong Lin Wang	62004-1892	3763

TITLE OF INVENTION: SEMICONDUCTING OXIDE NANOSTRUCTURES

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$685 700	\$300	\$985 1,000	03/01/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
STEIN, STEPHEN J	1775	428-689000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  
 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

- 1 Thomas, Kayden,  
 2 Horstemeyer & Risley, LLP  
 3

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Georgia Tech Research Corporation

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Atlanta, GA

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee  
☒ Publication Fee (No small entity discount permitted)  
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☐ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 20-0778\*\* (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

\*\*Insufficiencies Only

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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